



---

520 W Hwy 96, Suite 400, Shoreview, MN 55126 p: 651.482.7564 f: 651.482.0349 [www.vibrantdental.com](http://www.vibrantdental.com)

Patient Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

PREVIOUS DENTIST / PROVIDER

Dentist/Office: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

X-RAYS DESIRED:

Current Full Mouth

Current Panorex

Current Bitewings

---

Patient Signature

Date

COMMENTS / RESPONSE

---

---

---

**Michael J. Enz, D.D.S**

520 West Highway 96, Suite 400

Shoreview, MN 55126

Office Phone: 651.482.7564 Fax: 651.482.0349 Email: [amber@vibrantdental.com](mailto:amber@vibrantdental.com)